BEST AVAILABLE CODY

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

10064477

		CLAIMS AS		-	SMALL ENTITY		00	OTHER				
TOTAL CLAIMS			(Column 1)		(Column 2)		ſ	RATE FEE		OH I I	SMALL RATE	FEE
			31									
FC	PR 	<u>-</u>	NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			3/ minus 20=		* //			X\$ 9=		OR	X\$18=	198-
INDEPENDENT CLAIMS			→ minus 3 =		4			X42=		OR	X84=	336.
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=	
* f	the difference	in column 1 is	less than zero, enter "0" in			column 2		TOTAL		OR	TOTAL	1274
CLAIMS AS AMENDED - PART II										•	OTHER	THAN
(Column 1)			(Colum					SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDENT	CLAIM		1	+140=		00	+280=	
								TOTAL		OR	TOTAL	
								ADDIT. FEE		OR	ADDIT. FEE	L
		(Column 1) CLAIMS		(Colur HIGH		(Column 3)	1 .			1 1		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=]	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- 01 111	<u> -</u>	[X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDENT	CLAIM		ا ا	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)	_					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	;	RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=]	X42=		ΩB	X84=	
Ľ	FIRST PRESE	NTATION OF M	LTIPLE DEPENDENT		CLAIM		』 ├			OR		<u> </u>
	l i tha ant mala activ	mn 1 ia laas thas t	no antor in activ	mn O welle	, "O" in co	dumo 3		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		mber Previously P aber Previously Pa					er fou	nd in the app	ropriate box	c in co	lumn 1.	